## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10087125 ...

CLAIMS AS FILED - PART I							SMA	L E	NTITY			RTHAN
I	TOTAL CLAIM	S	(Colun	(Column 1)		(Column 2)				OR	SMALL	·
-		-					TE	FEE	<u> </u>	RATE.	FEE	
FOR			NÚMBE	NUMBER FILED		NUMBER EXTRA		FEE	385.00	OR	BASIC FEE	770.00
	OTAL CHARGI	EABLE CLAIMS	n n	ninus 20=	•		xs	9="		OR	XS18=	
iN :	DEPENDENT	CLAIMS		ninus 3 =	*		X4:	3=		OR	X86=	
М	ULTIPLE DEPE	ENDENT CLAIM	PRESENT	RESENT			+14	 5=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOT	<del></del>		OR	TOTAL	<u> </u>
CLAIMS AS AMENDED - PART II										٠,٠,٠,	OTHER	THAN
		(Column 1)		(Colun		(Column 3)	SMA	ENTITY	OR		ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVIO PAID F	BER	PRESENT: CXTRA	RAT	E ·	ADD! TIONAL FEE		RATE	ADDI TIONAL FEE
	Total	. 24	Minus	- 2	i/		XS 9	)=		OR	X\$18=	·
AME	Independent	1. 6	Minus	***	6	= -	X43		•	OR	X86=	
	FIRST PRES	ENTATION OF M	IULTIPLE DE	PENDENT	CLAIM		+145	· = ·	<del></del>	OR	+290=	
	•						TO ADDIT I	TAL		OR	TOTAL ADDIT: FEE	
		(Column 3)	ADDIT I	-cc ı		/						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY 1	PRESENT EXTRA	RAT	E	ADDI TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**	. •	-	XS.9			OR	X\$18=	
\ME	Inaependent	<u> </u>	Minus	***		=	X43			† . †	X86=	
<u>, ,                                   </u>	FIRST PRESE	NTATION OF MI	ULTIPLE DE	PENDENT (	CLAIM		-	-		OR		·
	•				÷ .		+145	<u></u>	• :	OR.	+290≔	
٠.						•	TO ADDIT F	AL EE	· · ·	OR.	TOTAL ADDIT FEE	
		(Column 1)		(Colum		(Column 3)						
AMENDMENIC		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOU PAID FO	ER JSLY	PRESENT EXTRA	RATE		AUDI- TIONAL : FEE		RATE	ADDI- TIONAL FEE
2	Total	*	Minus	**		=	X\$ 9:			OR	X\$18=	
	Independent	*	Minus	***		= .	X43=	+	· · ·		X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							_	——	OR .	^00=	·
				·	•		+145=			OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
71	tne "Highest Nur 1e "Highest Num!	nber Previously Pa ber Previously Paid	id For" IN THIS I For" (Total or	S SPACE is I Independent	ess than I) is the l	3, enter "3." Tighest number			priate box			